

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004

Annual Plan for Fiscal Year 2002 – 3rd Year

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH
INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Lackawanna Municipal Housing Authority

PHA Number: NY029

PHA Fiscal Year Beginning: (mm/yyyy) 07/2002

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☒ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☒ Public library
- ☐ PHA website
- ☒ Other (list below) **Community Centers – 3 locations. Plans are to open an additional youth recreation center by July 2002.**

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2000 - 2004

[24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: (state mission here)

To provide desirable quality housing within a safe, sanitary, and positive environment.

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

☒ PHA Goal: Expand the supply of assisted housing
Objectives:
☐ Apply for additional rental vouchers:
☒ Reduce public housing vacancies:
☒ Leverage private or other public funds to create additional housing opportunities:
☐ Acquire or build units or developments
☒ Other (list below) **Expand recreations facilities and playgrounds**

☒ PHA Goal: Improve the quality of assisted housing
Objectives:
☒ Improve public housing management: (PHAS score)
☐ Improve voucher management: (SEMAP score)
☒ Increase customer satisfaction:
☐ Concentrate on efforts to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)

- ☒ Renovate or modernize public housing units:
- ☒ Demolish or dispose of obsolete public housing:
- ☒ Provide replacement public housing:
- ☐ Provide replacement vouchers
- ☒ Other: (list below) **Lead Abate Remaining Units containing Lead Paint through Capital Fund Leveraging (Approximately 100 Units)**

- ☒ PHA Goal: Increase assisted housing choices

Objectives:

- ☐ Provide voucher mobility counseling:
- ☐ Conduct outreach efforts to potential voucher landlords
- ☐ Increase voucher payment standards
- ☐ Implement voucher homeownership program:
- ☐ Implement public housing or other homeownership programs:
- ☐ Implement public housing site-based waiting lists:
- ☐ Convert public housing to vouchers:
- ☐ Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- ☒ PHA Goal: Provide an improved living environment

Objectives:

- ☒ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- ☒ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- ☒ Implement public housing security improvements:
- ☒ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- ☒ Other: (list below) **Phased Renovation of Gates Avenue Developments**

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- ☒ PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- ☒ Increase the number and percentage of employed persons in assisted families:
- ☒ Provide or attract supportive services to improve assistance recipients' employability:
- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.

- ☒ Other: (list below) **Feasibility of contracting with 3rd Party Grant Writer**

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - ☒ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - ☐ Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2002
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

Streamlined Plan:

- ☒ **High Performing PHA**
☐ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

NO LONGER REQUIRED PER NOTICE # 99-51

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- ☐ Admissions Policy for Deconcentration
- ☒ FY 2002 Capital Fund Program Annual Statement See Exhibit A
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- Optional Attachments: *Certification of Payments-HUD50071-See Exhibit H
- ☐ PHA Management Organizational Chart
- ☒ FY 2002 Capital Fund Program 5 Year Action Plan – See Exhibit B
- ☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) – See Exhibit C

☒ Other (List below, providing each attachment name) Certification by State or Public Official...– HUD 50075 — See Exhibit G; PHA Certifications of Compliance and Certification for a Drug Free Work Place – See Exhibit F

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| List of Supporting Documents Available for Review | | |
|---|--|--|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| ✓ | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans |
| ✓ | State/Local Government Certification of Consistency with the Consolidated Plan | 5 Year and Annual Plans |
| | Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement. | |
| ✓ | Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction | Annual Plan: Housing Needs |
| ✓ | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources; |
| ✓ | Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP] | Annual Plan: Eligibility, Selection, and Admissions Policies |
| N/A | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies |
| ✓ Part of ACOP | Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis | Annual Plan: Eligibility, Selection, and Admissions Policies |
| ✓ | Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Rent Determination |

| List of Supporting Documents Available for Review | | |
|--|---|--|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| | | |
| ✓ | Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Rent Determination |
| N/A | Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| ✓ | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance |
| ✓ | Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| N/A | Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Grievance Procedures |
| ✓ | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year | Annual Plan: Capital Needs |
| N/A | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant | Annual Plan: Capital Needs |
| ✓ | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option) | Annual Plan: Capital Needs |
| N/A | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| N/A | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| N/A | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| N/A | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act | Annual Plan: Conversion of Public Housing |
| N/A | Approved or submitted public housing homeownership programs/plans | Annual Plan: Homeownership |
| N/A | Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan | Annual Plan: Homeownership |
| N/A | Any cooperative agreement between the PHA and the TANF | Annual Plan: Community |

| List of Supporting Documents Available for Review | | |
|--|---|---|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| | agency | Service & Self-Sufficiency |
| N/A | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |
| N/A | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports | Annual Plan: Community Service & Self-Sufficiency |
| ✓ | The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan) | Annual Plan: Safety and Crime Prevention |
| ✓ | The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit |
| N/A | Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |
| | | |

1. Statement of Housing Needs

[24 CFR Part 903.79 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

| Housing Needs of Families in the Jurisdiction by Family Type | | | | | | | |
|---|----------------|----------------------------|---------------|----------------|----------------------------|-------------|-----------------------|
| Family Type | Overall | Afford- ability | Supply | Quality | Access- ibility | Size | Loca- tion |
| Income <= 30% of AMI | 254 | 5 | 5 | 4 | 1 | 2 | 5 |
| Income >30% but <=50% of AMI | 142 | 5 | 5 | 4 | 1 | 2 | 5 |
| Income >50% but <80% of AMI | 61 | 5 | 5 | 4 | 1 | 2 | 5 |
| Elderly | 156 | 5 | 5 | 4 | 3 | 2 | 2 |
| Families with Disabilities | 98 | 5 | 5 | 4 | 5 | 2 | 1 |
| Race/Eth- Black | 320 | 5 | 5 | 4 | 1 | 2 | 5 |
| Race-Eth- White | 99 | 5 | 5 | 4 | 1 | 2 | 5 |

| Housing Needs of Families in the Jurisdiction by Family Type | | | | | | | |
|---|---------|--------------------|--------|---------|--------------------|------|---------------|
| Family Type | Overall | Afford- ability | Supply | Quality | Access- ibility | Size | Loca- tion |
| Race/Eth- Spanish | 41 | 5 | 5 | 4 | 1 | 2 | 5 |
| Race/Ethnicity | | | | | | | |

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☐ Consolidated Plan of the Jurisdiction/s
Indicate year:
- ☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- ☐ American Housing Survey data
Indicate year:
- ☐ Other housing market study
Indicate year:
- ☒ Other sources: **PHA Proprietary Software Database extrapolated figures from actual housing data – Public Housing Pro (HAPPY)**

-LMHA Tenant Files

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

| Housing Needs of Families on the Waiting List | | | |
|--|---|---------------------|-----------------|
| Waiting list type: (select one) | | | |
| <input type="checkbox"/> | Section 8 tenant-based assistance | | |
| <input checked="" type="checkbox"/> | Public Housing | | |
| <input type="checkbox"/> | Combined Section 8 and Public Housing | | |
| <input type="checkbox"/> | Public Housing Site-Based or sub-jurisdictional waiting list (optional) | | |
| If used, identify which development/subjurisdiction: | | | |
| | # of families | % of total families | Annual Turnover |

| Housing Needs of Families on the Waiting List | | | |
|--|-----------|------------|------------|
| Waiting list total | 56 | | 110 |
| Extremely low income <=30% AMI | 33 | 59% | |
| Very low income (>30% but <=50% AMI) | 15 | 27% | |
| Low income (>50% but <80% AMI) | 8 | 14% | |
| Families with children | 16 | 29% | |
| Elderly families | 23 | 41% | |
| Families with Disabilities | 17 | 30% | |
| Race/ethnicity - B | 23 | 41% | |
| Race/ethnicity - AI | | | |
| Race/ethnicity - AP | | | |
| Race/ethnicity - H | 11 | 20% | |
| Race/ethnicity - W | 22 | 39% | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | 40 | 71% | 27 |
| 2 BR | 7 | 13% | 41 |
| 3 BR | 6 | 11% | 27 |
| 4 BR | 2 | 4% | 9 |
| 5 BR | 1 | 1% | 6 |
| 5+ BR | 0 | 0 | 0 |
| <p>Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes:</p> <p>How long has it been closed (# of months)?</p> <p>Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> | | | |

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☐ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☐ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☐ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☐ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☒ Other (list below)

Phased Rehabilitation of 78 Units in the Gates Avenue Development bringing the interiors of same to modern standards.

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- ☐ Apply for additional section 8 units should they become available
- ☐ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☒ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☐ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: The Elderly**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- ☒ Seek designation of public housing for the elderly
- ☐ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below): **Feasibility Study and research of Financing Options for construction of 40 additional Elderly Designated Units.**

Need: Specific Family Types: Families with Disabilities**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- ☐ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- ☐ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☐ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☒ Limited availability of sites for assisted housing
- ☐ Extent to which particular housing needs are met by other organizations in the community
- ☐ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☐ Results of consultation with local or state government
- ☐ Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.79 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing

operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

| Financial Resources: Planned Sources and Uses | | |
|---|-----------------------|-------------------------|
| Sources | Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2001 grants) | \$1,343,686.00 | Modernization |
| a) Public Housing Operating Fund | \$1,481,340.00 | PHA Operating Budget |
| b) Public Housing Capital Fund | \$1,343,686.00 | Modernization |
| c) HOPE VI Revitalization | N/A | N/A |
| d) HOPE VI Demolition | N/A | N/A |
| e) Annual Contributions for Section 8 Tenant-Based Assistance | N/A | N/A |
| f) Public Housing Drug Elimination Program (including any Technical Assistance funds) | N/A | Security Patrol |
| g) Resident Opportunity and Self-Sufficiency Grants | N/A | N/A |
| h) Community Development Block Grant | N/A | N/A |
| i) HOME | N/A | N/A |
| Other Federal Grants (list below) | N/A | N/A |
| | | |
| 2. Prior Year Federal Grants (unobligated funds only) (list below) | | |
| CFP | \$300,000 | Continued Modernization |
| | | |
| | | |
| 3. Public Housing Dwelling Rental Income | | |
| | \$1,485,830.00 | Operating Fund |
| | | |
| 4. Other income (list below) | | |
| | | |
| | | |
| 4. Non-federal sources (list below) | | |
| | | |
| | | |
| | | |
| Total resources | \$4,610,856.00 | |
| | | |

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

☒ When families are within a certain number of being offered a unit: (state number)

First Five (5) Applicants on the List

☐ When families are within a certain time of being offered a unit: (state time)

☒ Other: (describe) **During final interview - verification of background and proper documentation of incomes sources.**

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

☒ Criminal or Drug-related activity

☒ Rental history

☒ Housekeeping

☐ Other (describe)

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

☐ Community-wide list

☐ Sub-jurisdictional lists

☐ Site-based waiting lists

☒ Other (describe) **Separate Elderly and Family Based Waiting Lists**

b. Where may interested persons apply for admission to public housing?

☒ PHA main administrative office

☐ PHA development site management office

☐ Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously
If yes, how many lists

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- ☐ PHA main administrative office
- ☐ All PHA development management offices
- ☐ Management offices at developments with site-based waiting lists
- ☐ At the development to which they would like to apply
- ☐ Other (list below)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- ☒ One
- ☐ Two
- ☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

☒ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- ☒ Emergencies
- ☒ Overhoused
- ☒ Underhoused
- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☒ Other: (list below) **Executive Director Justification for extenuating circumstances this are the cause of hardships or non-peaceful conditions**

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
- ☒ Veterans and veterans' families
- ☒ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)

Elderly/disabled, Near Elderly

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

Date and Time

Former Federal preferences: **THE BELOW PREFERENCES ARE OF EQUAL WEIGHT – (FORMER FEDERAL PREFS ARE NOT APPLIED)**

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☒ Veterans and veterans’ families
- ☒ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)

Elderly/disabled, Near Elderly

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA-resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☐ PHA briefing seminars or written materials
- ☒ Other source (list) **Newsletter and specific literature drops and postings**

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal
- ☒ Any time family composition changes
- ☒ At family request for revision
- ☐ Other (list)

(6) Deconcentration and Income Mixing

a. ☐ Yes ☐ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☐ Yes ☐ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- ☐ Adoption of site-based waiting lists
If selected, list targeted developments below:
- ☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- ☐ Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- ☐ Other (list policies and developments targeted below)

d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)
SEE EXHIBIT H # - REPLACEMENT DECONCENTRATION QUESTIONS PER FINAL RULE (PIH99-51)

- ☐ Additional affirmative marketing
- ☐ Actions to improve the marketability of certain developments
- ☐ Adoption or adjustment of ceiling rents for certain developments
- ☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- ☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

B. Section 8 NOTE: The Lackawanna Municipal Housing Authority Does Not Have Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.

Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- ☐ Criminal or drug-related activity only to the extent required by law or regulation
- ☐ Criminal and drug-related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug-related activity (list factors below)
- ☐ Other (list below)

b. ☐ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

- c. ☐ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ☐ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- ☐ Criminal or drug-related activity
- ☐ Other (describe below)

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- ☐ None
- ☐ Federal public housing
- ☐ Federal moderate rehabilitation
- ☐ Federal project-based certificate program
- ☐ Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- ☐ PHA main administrative office
- ☐ Other (list below)

(3) Search Time

- a. ☐ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

(4) Admissions Preferences

- a. Income targeting

- ☐ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☐ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Victims of domestic violence

Substandard housing

Homelessness

High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families

- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- ☐ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☐ The Section 8 Administrative Plan
- ☐ Briefing sessions and written materials
- ☐ Other (list below)

- b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☐ Through published notices
☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

- a. Use of discretionary policies: (select one)

- ☒ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- ☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

- b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
☐ \$1-\$25
☒ \$26-\$50

2. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

Section G of ACOP

c. Rents set at less than 30% than adjusted income

1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☐ For the earned income of a previously unemployed household member
- ☐ For increases in earned income
- ☐ Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

- ☐ Fixed percentage (other than general rent-setting policy)
- If yes, state percentage/s and circumstances below:

- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- ☒ Yes for all developments
- ☐ Yes but only for some developments
- ☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
- ☐ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high-rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☐ Market comparability study
- ☒ Fair market rents (FMR)
- ☐ 95th percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☐ Operating costs plus debt service
- ☐ The "rental value" of the unit
- ☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
- ☐ At family option
- ☒ Any time the family experiences an income increase
- ☒ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \$200 for residents hired by the Authority
- ☒ Other (list below) **or Decrease**

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☐ The section 8 rent reasonableness study of comparable housing
- ☐ Survey of rents listed in local newspaper
- ☐ Survey of similar unassisted units in the neighborhood
- ☒ Other (list/describe below) **The LMHA will adopt Flat Rents as of Oct. 1, 2002**

B. Section 8 Tenant-Based Assistance

NOTE : The Lackawanna Municipal Housing Authority does not have Section 8

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
- ☐ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☐ Annually
- ☐ Other (list below)

- d. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

☐ Success rates of assisted families

☐ Rent burdens of assisted families

☐ Other (list below)

(2) Minimum Rent

- a. What amount best reflects the PHA's minimum rent? (select one)

☐ \$0

☐ \$1-\$25

☐ \$26-\$50

- b. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management Note HA does not have Section 8

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

☐ An organization chart showing the PHA's management structure and organization is attached

☐ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

| Program Name | Units or Families Served at Year Beginning | Expected Turnover |
|---|--|-------------------|
| Public Housing | | |
| Section 8 Vouchers | | |
| Section 8 Certificates | | |
| Section 8 Mod Rehab | | |
| Special Purpose Section 8 Certificates/Vouchers (list individually) | | |
| Public Housing Drug Elimination Program (PHDEP) | | |
| | | |
| | | |
| Other Federal Programs(list individually) | | |
| CGP | | |
| CFP | | |

C. Management and Maintenance Policies

List the PHA’s public housing management and maintenance policy documents, manuals and handbooks that contain the Agency’s rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)
- (2) Section 8 Management: (list below)

6. PHA Grievance Procedures

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A. **The LMHA is a high-performer**

Public Housing

1. ☐ Yes ☐ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- ☐ PHA main administrative office
- ☐ PHA development management offices
- ☐ Other (list below)

B. Section 8 Tenant-Based Assistance

1. ☐ Yes ☐ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- ☐ PHA main administrative office
- ☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan (see below at end of plan)

-or-

☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☐ Yes ☒ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☐

-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development
- ☐ Revitalization Plan submitted, pending approval
- ☐ Revitalization Plan approved
- ☐ Activities pursuant to an approved Revitalization Plan underway

- ☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
- If yes, list development name/s below:

- ☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
- If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
- If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

| Demolition/Disposition Activity Description | |
|---|--|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/> | |
| 3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/> | |
| 4. Date application approved, submitted, or planned for submission: (DD/MM/YY) | |
| 5. Number of units affected: | |
| 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development | |
| 7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity: | |

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined

submission; PHAs completing streamlined submissions may skip to component

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

| Designation of Public Housing Activity Description |
|--|
| 1a. Development name: |
| 1b. Development (project) number: |
| 2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/> |
| 3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/> |
| 4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u> |
| 5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan? |
| 6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development |

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If “No”, skip to component 11; if “yes”, complete one activity description for each identified development, unless eligible to complete a streamlined

submission. PHAs completing streamlined submissions may skip to component 11

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

| Conversion of Public Housing Activity Description | |
|--|---|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. What is the status of the required assessment? | <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below) |
| 3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.) | |
| 4. Status of Conversion Plan (select the statement that best describes the current status) | <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway |
| 5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) | <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below) |

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

| Public Housing Homeownership Activity Description (Complete one for each development affected) |
|--|
| 1a. Development name: 1b. Development (project) number: |
| 2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99) |
| 3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application |
| 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY) |
| 5. Number of units affected: 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development |

B. Section 8 Tenant Based Assistance Note: The Lackawanna Municipal Housing Authority does not have Section 8

1. ☐ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is

eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

b. PHA-established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C. **THE LMHA IS A HIGH-PERFORMER**

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☐ Yes ☐ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☐ Client referrals
☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
☐ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
☐ Jointly administer programs

- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas?

(select all that apply)

- ☐ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☐ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

| Services and Programs | | | | |
|--|-------------------|--|--|--|
| Program Name & Description (including location, if appropriate) | Estimated Size | Allocation Method (waiting list/random selection/specific criteria/other) | Access (development office / PHA main office / other provider name) | Eligibility (public housing or section 8 participants or both) |
| | | | | |
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(2) Family Self Sufficiency program/s

a. Participation Description

| Family Self Sufficiency (FSS) Participation | | |
|--|--|--|
| Program | Required Number of Participants (start of FY 2001 Estimate) | Actual Number of Participants (As of: DD/MM/YY) |
| Public Housing | | |
| Section 8 | | |

- b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- ☐ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
 - ☐ Informing residents of new policy on admission and reexamination
 - ☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
 - ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
 - ☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
 - ☐ Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☐ Residents fearful for their safety and/or the safety of their children
- ☐ Observed lower-level crime, vandalism and/or graffiti
- ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☐ Safety and security survey of residents
- ☐ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☐ Resident reports
- ☐ PHA employee reports
- ☐ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

3. Which developments are most affected? (list below)

Baker Homes

Gates Avenue Project

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☐ Crime Prevention Through Environmental Design

- ☐ Activities targeted to at-risk youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☐ Other (describe below)

2. Which developments are most affected? (list below)

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☐ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- ☐ Police provide crime data to housing authority staff for analysis and action
- ☐ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☐ Police regularly testify in and otherwise support eviction cases
- ☐ Police regularly meet with the PHA management and residents
- ☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

2. Which developments are most affected? (list below)

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2001 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- ☐ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- ☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?
- ☐ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: **NY029a04 – Attachment #4 (and NY029a05– Attachment #5)**)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

EXHIBIT “1”

PET POLICY

ADDENDUM

TO

LACKAWANNA MUNICIPAL HOUSING AUTHORITY (LMHA)

DWELLING LEASE

Site No. _____ Dog _____ Cat(s) _____ Rabbit(s)

Apartment

No. _____

Animal's Name and Age

1. Families residing in a Public Housing unit are allowed to keep common household pets in their apartments as stated in their lease and in accordance with the Code of Federal Regulations. Families may request permission to keep a common household pet in accordance to the policies and conditions contained herein.
2. **Households will be limited to either: ONE (1) dog, TWO (2) cats; TWO (2) birds; TWO (2) rabbits, hamsters, gerbils; or ONE (1) aquarium (fish) per household Only one kind of common household pet (dog, cat, fish, etc.) will be allowed in the household per the above limitations. The LMHA strictly prohibits any pit bulls from the property of the Authority. Any pit bulls observed, discovered or believed to be on LMHA property will be removed immediately by the Dog Warden of the City of Lackawanna.**
3. To comply with all applicable laws and ordinances of the State of New York, and the City of Lackawanna. The General Provisions of the City of Lackawanna regarding Animals and Fowls, Article I, Chapter 54 will be posted in the main office of the Authority for inspection.
4. Common household pets shall be defined as dogs, cats, rabbits, birds or fish.
5. Pets, except birds and fish, must be registered with the LMHA office when acquired and annually thereafter at the time of the annual re-certification each and every year. Registering a dog/cat/rabbit requires proof of current dog/cat license, if applicable, up to date inoculations, identification tag and verification that the animal has been spayed/neutered and written proof of a satisfactory annual medical checkup by a licensed veterinarian, which shall include verification from the licensed veterinarian that the animal is free from flea infestation.

6. Tenant shall provide dog/cat with a collar containing a New York State license. A valid rabies tag, and a tag bearing the owner's name, apartment number and phone number must be worn at all times when the pet is not in the tenant's dwelling unit. This applies to dogs/cats/rabbits.
7. Only pets that are directly owned by tenant and registered with the LMHA are permitted on premises. (No visiting pets allowed)
8. No pet shall be left unattended in the dwelling unit for a period of time in excess of twelve (12) hours. Additionally, no pets are to be left unattended or left on a leash in the common areas (doors, porches, fences, hallways, etc.) of the Authority.
9. Tenant shall identify and document willingness of a third party (**designated attendant**) who will, within one hour of notification, remove and care for the pet in the event of sudden illness, injury or death of the tenant. Third party must sign a document, supplied by the LMHA assuming responsibility for the animal. In the event designated party fails to act, the LMHA shall be authorized to cause the removal and disposal of the animal. The name, address and telephone number of the designated attendant shall be registered at the office of the Authority at the execution of this pet addendum. No exceptions will be made and the Authority must be notified immediately of any changes of attendant status or inability to act as same.
10. Female dogs/cats/rabbits over six months of age must be spayed and male dogs/cats/rabbits over eight months of age must be neutered.
11. Weight, overall size and temperament shall have a bearing on the acceptability of the pet. Dogs weighing more than **25 pounds** when fully grown shall not be permitted.
12. Pet owners of a dog or cat(s) are required to pay a Pet **Security Deposit in the amount of \$100.00 (One Hundred Dollars) for each animal** to insure that the LMHA will be compensated for costs of damage to unit or the project caused by the pet. Pet Security Deposits shall not be subject to any limitations on Security Deposits provided by State or Local Laws. The LMHA agrees to return Pet Security Deposit, within twenty days after termination of tenancy and restoration of possession to the LMHA or the disposal of the pet. The LMHA will provide a written, itemized statement of any and all amounts withheld from the Pet Security Deposit and will use said deposit only for damages or destruction caused by said pet.
13. When outside of owner's dwelling unit, all dogs/cats/rabbits shall be on a leash measuring not more than four (4) feet or in a proper carrying case and the animal shall be under control of a responsible person able to control it. **No pet shall block any sidewalk, walkway, entrance or any common area when in the presence of his or her owner. Owners will be responsible to heel their pet accordingly and to properly yield to any other resident, their family members or guest(s) as to not induce any fear or apprehension.**
14. **PARKVIEW TOWERS ONLY:** Pets are permitted in Elevator No. 1 only. When possible, the animal should be carried in and out of the elevator. Areas prohibited to pets are: Elevator No. 2 laundry room, community room and public lavatories.
15. Tenant owning a cat/rabbit shall provide a litter tray/cage for the animal's use in owner's apartment. Litter must be wrapped in a securely tied plastic bag and disposed of at least twice a week in a designated receptacle. **DISPOSAL OF LITTER IN THE GARBAGE CHUTES WILL NOT BE PERMITTED.**

16. Dogs, cats and rabbits shall not be permitted to excrete anywhere in the building (other than cats/rabbits using litter box/cage, in apartment). The LMHA shall designate an area on the grounds for use of the dogs. Tenants shall be responsible for immediately removing dog feces dropped ANYWHERE, placing same in a plastic bag and placing same in a designated receptacle.
17. Tenant shall ensure that pet does not make excessive noise, which will disrupt the peace of complex.
18. Tenant shall ensure that pet will not create excessive odor, which will cause discomfort to other residents of the project.
19. EMERGENCY CONDITIONS:
If a pet exhibits behavior that constitutes **a reason to believe** an immediate threat to health or safety, the LMHA may contact the appropriate or designated agent to enter pet owner's unit, remove pet, place in a facility provided (SPCA) for no less than thirty (30) days. The cost of animal care may be paid from the security deposit of the owner.
20. NUISANCE OR THREAT TO HEALTH OR SAFETY:
The Executive Director of the LMHA reserves the right to remove any pets from its developments or properties if the pet's conduct or actions are duly determined or believed to be a nuisance or a possible threat to the health or safety of other occupants of the projects, staff and other organized individuals in or on the grounds of the projects, or other person(s) in the community where the developments/ sites are located.
21. In order to achieve continuation of pet residency within the LMHA, the tenant agrees to the possibility of relocating to another unit (or to another designated area within the development) to accommodate other existing tenants for whom the presence of a pet may reasonably constitute a health threat or a perceived fear.
22. Seeing eye dogs or other like animals that are specifically trained to assist the handicapped must also be maintained by the owner in a manner to assure safe, sanitary and decent living conditions of the project but are not subject to the restrictions of numbers 10 and 13 of this policy.
23. Tenant is required to sign this addendum and this signature certifies that tenant read the policy requirements, agrees to comply with them and further agrees that violation of this policy is grounds for termination of tenancy.
24. Any tenant to be found in non-compliance or refuses to obey said conditions of this policy will be subject to eviction proceedings. Residents will be notified of the existence and intent of this policy and will be expected to adhere to conditions contained herein. The LMHA reserves the right to remove or refuse any pet or animal it sees as reasonably: posing a threat, causing or inducing fear onto other residents, unfit, belying the integrity of a healthful and safe milieu, or otherwise believes as inappropriate to inhabit any site of the Authority. Any liability that may be incurred (for damages due to bodily injury to person or property of the LMHA or otherwise) as a result of ownership of a pet by a tenant will be the sole responsibility of the tenant. The landlord (LMHA) is hereby absolved by signature below as held harmless and non-labile in the event of such an occurrence. All payment for damages to Authority property as a result of ownership of a pet will be made chargeable to the tenant account and made payable to the Authority.

IT IS THE INTENTION OF BOTH PARTIES TO THIS ADDENDUM THAT IT IS TO BE INCORPORATED INTO THE LEASE AS IF FULLY SET FORTH THEREIN.

LACKAWANNA MUNICIPAL HOUSING AUTHORITY:

DATE:

Resident

Executive Director

Designated Attendant

Phone # and Address of Attendant

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)? _____

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component. **THE LMHA IS A HIGH PERFORMER**

1. ☐ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment,

rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- ☐ Not applicable
- ☐ Private management
- ☐ Development-based accounting
- ☐ Comprehensive stock assessment
- ☐ Other: (list below)

3. ☐ Yes ☐ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- ☐ Attached at Attachment
- ☐ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary.
- ☒ The PHA changed portions of the PHA Plan in response to comments
List changes below: **-Capital Fund Meetings - Modernization**
- ☐ Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☒ Yes ☐ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- ☐ Candidates were nominated by resident and assisted family organizations
☐ Candidates could be nominated by any adult recipient of PHA assistance
☒ Self-nomination: Candidates registered with the PHA and requested a place on ballot
☐ Other: (describe)

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance
☐ Any head of household receiving PHA assistance
☒ Any adult recipient of PHA assistance
☐ Any adult member of a resident or assisted family organization
☐ Other (list)

c. Eligible voters: (select all that apply)

- ☒ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
☐ Representatives of all PHA resident and assisted family organizations
☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: **Erie County, New York State**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

☒ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Low Income Housing –The Lackawanna Municipal Housing Authority is committed to providing clean, safe, healthy and sanitary conditions for it's residents.

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

***NY029a01...**

Exhibit A*Attachment #1 – “Capital Fund Meetings”

*Note: Supplied as an attachment as a 5 Page PDF document comprising recommendations and meeting sign-in sheets for each of the Authority’s three projects

*** NY029a02...**

Exhibit B- Attachment #2 – “PHA Certifications of Compliance with the PHA Plan and Related Regulations, Certification for a Drug Free Workplace and Disclosure of Lobbying Activities” Note: Supplied as an attachment as a 6 Page PDF document

***NY029a03...**

Exhibit C - Attachment #3 – “Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan” – Note: Supplied as an attachment as a 2 Page PDF Document

***NY029a04...**

Exhibit D - Attachment #4 –“Certification of Payments to Influence Federal Transactions” –form HUD 50071 - Note: Supplied as 2 page PDF Document

***NY029a05...**

Exhibit E - Attachment #5 –“Scope and Schedules of LMHA Maintenance Policy” - Note: Supplied as 15 page PDF Document

***NY029a06...**

Exhibit F - Attachment #6 –“Statement of Progress of Five (5) Year Plan of the QHWRA of 1998” - Note: Supplied as 2 page PDF Document

***NY029a07...**

Exhibit G - Attachment #7 –“Annual Statement/ Performance and Evaluation Reports for Fiscal Years 1999, 2000 & 2001” - Note: Supplied as 19 page PDF Document

***NY029a08...**

Exhibit H - Attachment #8 –“Replacement Deconcentration Questions per FINAL RULE (Notice 99-51)” - Note: Supplied as 1 page PDF File

***NY029a09...**

Exhibit I - Attachment #9 –“Voluntary Conversions Initial Assessments Components 10 (b))” - Note: Supplied as 1 page PDF File

***NY029a10...**

Exhibit J - Attachment #10 –“LMHA Commissioner Appointment List ” - Note: Supplied as 1 page PDF File

PHA Plan Table Library

Component 7

Capital Fund Program Annual Statement Parts I, II, and II

Annual Statement

Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number

FFY of Grant Approval: (07/2002)

NY06P02950102

☒ Original Annual Statement

| Line No. | Summary by Development Account | Total Estimated Cost |
|----------|---|----------------------|
| 1 | Total Non-CGP Funds | |
| 2 | 1406 Operations | 60,000.00 |
| 3 | 1408 Management Improvements | 158,377.00 |
| 4 | 1410 Administration | 128,316.00 |
| 5 | 1411 Audit | 0 |
| 6 | 1415 Liquidated Damages | 0 |
| 7 | 1430 Fees and Costs | 50,000.00 |
| 8 | 1440 Site Acquisition | 0 |
| 9 | 1450 Site Improvement | 20,000.00 |
| 10 | 1460 Dwelling Structures | 811,474.00 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 50,000.00 |
| 12 | 1470 Nondwelling Structures | 5,000.00 |
| 13 | 1475 Nondwelling Equipment | |
| 14 | 1485 Demolition | 0 |
| 15 | 1490 Replacement Reserve | 0 |
| 16 | 1492 Moving to Work Demonstration | 0 |
| 17 | 1495.1 Relocation Costs | 0 |
| 18 | 1498 Mod Used for Development | 0 |
| 19 | 1502 Contingency | 0 |
| 20 | Amount of Annual Grant (Sum of lines 2-19) | 1,283,167.00 |
| 21 | Amount of line 20 Related to LBP Activities | 771,474.00 |
| 22 | Amount of line 20 Related to Section 504 Compliance | 0 |
| 23 | Amount of line 20 Related to Security | 10,000 |
| 24 | Amount of line 20 Related to Energy Conservation Measures | 0 |

Annual Statement**Capital Fund Program (CFP) Part II: Supporting Table**

| Development Number/Name HA-Wide Activities | General Description of Major Work Categories | Development Account Number | Total Estimated Cost |
|--|---|----------------------------------|-----------------------------|
| NY029-1 Baker Homes | Lead Based Paint Abatement Playground Equipment Provide Dryer Venting | 1460 1450 1460 | 771,474 20,000 15,000 |
| NY029-2 Gates Avenue | None | | |
| NY029-6 Parkview Towers | Community Room Improvements Electrical Improvements | 1470 1460 | 5,000 25,000 |

| | | | |
|--|--|--|--|
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|--|--|--|--|

Annual Statement

Capital Fund Program (CFP) Part II: Supporting Table

| Development Number/Name HA-Wide Activities | General Description of Major Work Categories | Development Account Number | Total Estimated Cost |
|--|---|----------------------------------|----------------------------|
| PHA Wide | Security Patrol & Equipment | 1408 | 10,000 |
| | Appliances | 1465.1 | 50,000 |
| | Resident Employment & Training | 1408 | 20,000 |
| | Recreation Program (Recreation Leader, Recreation Leader Trainee, Activities & Supplies) | 1408 | 100,000 |
| | Tenant Moving Assistant | 1408 | 3,000 |
| | Modernization Coordinator | 1410 | 50,000 |
| | Clerk of the Works | 1410 | 46,670 |
| | A/E Fees | 1430 | 50,000 |
| | Sundry | 1410.19 | 2,000 |
| | Staff Training | 1408 | 3,000 |
| | Computer Software | 1408 | 2,000 |
| | Tenant Screening | 1408 | 1,000 |
| | Executive Director | 1410 | 19,230 |
| | Housing Project Assistant | 1410 | 5,371 |
| | Principal Account Clerk | 1410 | 5,045 |
| | Housing Inspector – Part- Time | 1408 | 19,377 |
| | Operations | 1406 | 60,000 |
| | | | |
| | | | |

Annual Statement**Capital Fund Program (CFP) Part III: Implementation Schedule**

| Development Number/Name HA-Wide Activities | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|--|--|---|
| NY029-1 Baker Homes | 12/31/03 | 6/30/05 |
| NY029-2 Gates Avenue | 12/31/03 | 6/30/05 |
| NY029-6 Parkview Towers | 12/31/03 | 6/30/05 |
| PHA Wide | 12/31/03 | 6/30/05 |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|---|---------------------|-------------------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| NY029001 | Baker Homes | 271 | |
| Description of Needed Physical Improvements or Management Improvements | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Lead Based Paint Abatement | | 3,500,000 | 2003 |
| New Roof, Gutters and Downspouts | | 600,000 | 2004 |
| Underground Utilities and Sewerline Repair | | 200,000 | 2004 |
| New Cabinets | | 20,000 | 2003 |
| Stationary Tubs, Drain Lines | | 10,000 | 2003 |
| Furnaces as needed | | 20,000 | 2003 |
| Exterior Brick Cleaning and Pointing | | 100,000 | 2003 |
| Sitework (Landscaping, concrete & paving) | | 20,000 | 2003 |
| Steps and Railings (as needed) | | 5,000 | 2004 |
| Floor Replacement (Lino and Hardwood) | | 10,000 | 2003 |
| Outside Lighting (Security and Residential) | | 10,000 | 2004 |
| Bathroom Fixtures (Toilets, sinks, tubs, handicap railings, etc.) | | 10,000 | 2003 |
| Interior Doors | | 5,000 | 2003 |
| Entrance and Exterior Doors | | 15,000 | 2003 |
| Update Intercom Systems | | 2,000 | 2003 |
| Electrical Improvements | | 10,000 | 2003 |
| Exhaust Fans (over ranges) | | 10,000 | 2003 |
| Total estimated cost over next 5 years | | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|--|---------------------|--|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| NY029001 | Baker Homes (continued) | 271 | |
| Description of Needed Physical Improvements or Management Improvements | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Ventilation (Basement) | | 50,000 | 2003 |
| Recaulk Windows | | 10,000 | 2003 |
| Bakershop Youth Center | | 20,000 | 2003 |
| Upgrade Playground – Equipment: Shelter, Sprinkler, Football Field, etc. | | 20,000 | 2003 |
| Demolition | | 50,000 | 2005 |
| Total estimated cost over next 5 years | | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|--|---------------------|--|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| NY029002 | Gates Avenue | 126 | |
| Description of Needed Physical Improvements or Management Improvements | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Interior Plumbing (Improvements, fixtures, piping) | | 25,000 | 2003 |
| Electrical Improvements | | 10,000 | 2005 |
| Replace Roofs | | 50,000 | 2004 |
| Renovate Laundromat | | 5,000 | 2005 |
| Repair/ Replace Parking Lots | | 25,000 | 2003 |
| Scope out Sewer Lines | | 15,000 | 2003 |
| Outside Lighting (Security and Residential) | | 10,000 | 2004 |
| Exterior – Masonry Repair | | 10,000 | 2003 |
| Replace T-111 | | 15,000 | 2003 |
| Fire Escapes/ Exit | | 25,000 | 2003 |
| Hot Water Tanks | | 10,000 | 2003 |

| | | |
|--|--|--|
| | | |
| Total estimated cost over next 5 years | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | | |
|--|---|---------------------|----------------------------|-------------------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development | |
| NY029002 | Gates Avenue (continued) | 126 | | |
| Description of Needed Physical Improvements or Management Improvements | | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Painting Interior/ Exterior | | | 50,000 | 2003 |
| Community Room Improvements | | | 10,000 | 2003 |
| Underground Utilities | | | 100,000 | 2004 |
| Caulking | | | 5,000 | 2003 |
| Replace Windows | | | 50,000 | 2004 |
| Boiler Replacement | | | 10,000 | 2003 |
| Kitchen Cabinets | | | 15,000 | 2005 |
| Site Work – (Sidewalks, landscaping, etc.) | | | 50,000 | 2004 |
| Reconfigure Apartments | | | 50,000 | 2003 |
| Doors (Interior, Exterior, Storms) | | | 25,000 | 2004 |

| | | |
|---|--|--|
| | | |
| Total estimated cost over next 5 years | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|--|---------------------|--|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| NY029006 | Parkview Towers | 94 | |
| Description of Needed Physical Improvements or Management Improvements | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| Community Room Improvements | | 5,000 | 2005 |
| Exterior Doors – Trash Area, etc. | | 2,500 | 2003 |
| Plumbing – Faucets, drains, fixtures, watertanks | | 20,000 | 2004 |
| Replace Handicap Ramps | | 15,000 | 2003 |
| Caulk – Exterior, windows, etc. | | 25,000 | 2003 |
| Redirect Roof Drain | | 2,000 | 2003 |
| Replace Windows | | 50,000 | 2005 |
| Sprinklers | | 20,000 | 2003 |
| Convert Electric Heat to Gas | | 50,000 | 2003 |

| | | |
|--|--------|------|
| Replace Laundry Room Equipment, etc. | 10,000 | 2004 |
| Sand, Varnish/ Replace Cupboards | 10,000 | 2003 |
| Total estimated cost over next 5 years | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|---|---------------------|-------------------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| NY029006 | Parkview Towers - continued | 94 | |
| Description of Needed Physical Improvements or Management Improvements | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| New Flooring – Linoleum & Carpet – Apartments and all other areas | | 50,000 | 2003 |
| Replace Appliances | | 100,000 | 2003 |
| Dumpsters | | 5,000 | 2005 |
| Paint Apartments, halls, etc | | 10,000 | 2004 |
| Electrical Improvements | | 10,000 | 2003 |
| Sitework – Landscaping, walks, etc. | | 5,000 | 2004 |
| Repair Parking Lots, Resurfacing, seal and paint | | 2,500 | 2003 |
| Fencing | | 2,000 | 2005 |
| Hallway Ventilation – Heat Control | | 10,000 | 2003 |
| New Windows and Screens | | 50,000 | 2005 |

| | | |
|--|--|--|
| | | |
| Total estimated cost over next 5 years | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

| Optional 5-Year Action Plan Tables | | | |
|--|---|---------------------|----------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| PHA Wide | PHA Wide | | |
| Description of Needed Physical Improvements or Management Improvements | | | Estimated Cost |
| New Entry (Door Lock System) | | | 2002 |
| New Resource Center | | | 2004 |
| New Replacement Screens | | | 2003 |
| Appliances (Stoves and Refrigerators) | | | 2003 |
| Storm Doors (as needed) | | | 2004 |
| Dumpsters | | | 2003 |
| Hot Water Tanks | | | 2003 |
| Smoke Detectors | | | 2004 |
| Parking Lots (Repair, Sealing and Striping) | | | 2003 |
| Ventilation – Additional Basement Windows | | | 2003 |
| Modernization Trucks | | | 2004 |
| Computer Hardware | | | 2003 |

| | | |
|---|----------------|-------------|
| Housing Inspector – Part-Time | 100,000 | 2002 |
| Total estimated cost over next 5 years | | |

Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

[illegible]

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|

EXHIBIT I

Voluntary Conversions Initial Assessments Component 10 (b)

COMPONENT 10, (b) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the required initial assessments?

Two

- b. How many of the PHA's developments are not subject to the required initial assessments based on exemptions?

One

- c. How many assessments were conducted for the PHA's covered developments

In Process

- d. Identify PHA Developments that may be appropriate for conversion based on the required initial assessments:

None

- e. Streamlined consolidated plan requirements for multiple jurisdictions :

N/A

- f. Resident Advisory Board Notification of Plan Process:

See Attachment A enclosed

EXHIBIT J

Appointment & Organization Chart - LMHA

Lackawanna Municipal Housing Authority

Board of Commissioners and Executive Committee

Appointment & Organizational Chart

| Commissioners and Executive Committee | | | Term of Appointment | | |
|--|---------------------|--|---|-------------------|------------------------|
| Title | Name | Address | Phone(s) | Appt. Date | Expiration Date |
| Chairman | Salvatore Monaco | 87 Shamokin Drive Lackawanna, NY 14218 | 823-0906 | 11/15/00 | 11/15/2005 |
| Vice-Chairman | Narciso Rodriguez | 29 Orange Street Lackawanna, NY 14218 | 825-6865 | 11/6/00 | 11/15/2002 |
| Executive Director | Thomas J. Radich | 42 Bedford Avenue Lackawanna, NY 14218 | 827-8369 - H 823-2551 - W | 1/31/01 | 1/31/05 |
| Counsel (Acting) | Frank L. Bybel | 674 Ridge Road Lackawanna, NY 14218 | 823-2558 - W 308-3446 - C | 1/31/01 | |
| Commissioner | Jimmie Royster, Jr. | 137 Wilmoth Lackawanna, NY 14218 | 822-4182 H, 570-3462 C, 517-2236 W, 517-3841 W | 2/22/00 | 11/15/2003 |
| Tenant Commissioner | Dorothy Glover | 56-1 Gates Avenue Lackawanna, NY 14218 | 828-1435 | 7/1/02 | 6/30/2004 |
| Tenant Commissioner | Mary Rodriguez | 21 Olcott, Lackawanna, NY 14218 | | 7/1/02 | 6/30/2004 |
| Member | Anthony | 79 Circle Lane | H - 826-2167, W | 12/22/00 | 11/15/2004 |

| | | | | | |
|--------|----------------|--|------------|----------|------------|
| | Mingarelli | Lackawanna, NY 14218 | 652-1380 | | |
| Member | John D. Bozich | 158 Edison Street Lackawanna, NY 14218 | H-823-4947 | 11/15/01 | 11/15/2006 |

COMMISSIONERS AND EXECUTIVE COMMITTEE ARE KINDLY ASKED TO PROVIDE THE MOST RECENT CONTACT INFORMATION TO BOARD SECRETARY TO ENSURE THAT LIST IS UP -TO-DATE AND ACCURATE.

EXHIBIT G

Annual Statement/
Performance and
Evaluation Reports for
Fiscal Years 1999, 2000,
2001

Annual Statement/Performance
and Evaluation Report

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Part I: Summary

Comprehensive Grant Program (CGP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

HA Name Lackawanna Municipal Housing Authority

Comprehensive Grant Number
NY06FO29707-99

FFY of Grant Approval
1999

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number ☒ Performance & Evaluation Report for Program Year Ending 12/01 ☐ Final Performance & Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) | |
|----------|---|----------------------|--------------|-----------------------|--------------|
| | | Original | Revised (1) | Obligated | Expended |
| 1 | Total Non-CGP Funds | 0 | 0 | 0 | 0 |
| 2 | 1406 Operations | 0 | 0 | 0 | 0 |
| 3 | 1408 Management Improvements | 308,436.58 | 303,436.58 | 303,436.58 | 303,436.58 |
| 4 | 1410 Administration | 138,763.60 | 112,129.78 | 112,129.78 | 112,129.78 |
| 5 | 1411 Audit | 0 | 0 | 0 | 0 |
| 6 | 1415 Liquidated Damages | 0 | 0 | 0 | 0 |
| 7 | 1430 Fees and Costs | 100,000.00 | 79,409.71 | 79,409.71 | 79,409.71 |
| 8 | 1440 Site Acquisition | 0 | 0 | 0 | 0 |
| 9 | 1450 Site Improvement | 16,475.00 | 14,975.00 | 14,975.00 | 14,975.00 |
| 10 | 1460 Dwelling Structures | 712,353.36 | 784,839.14 | 784,839.14 | 784,839.14 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 62,044.04 | 62,044.04 | 62,044.04 | 62,044.04 |
| 12 | 1470 Nondwelling Structures | 30,000.00 | 16,866.75 | 16,866.75 | 16,866.75 |
| 13 | 1475 Nondwelling Equipment | 20,000.00 | 13,935.00 | 13,935.00 | 13,935.00 |
| 14 | 1495.1 Relocation Costs | 0 | 0 | 0 | 0 |
| 15 | 1490 Replacement Reserve | 0 | 0 | 0 | 0 |
| 16 | 1502 Contingency (may not exceed 8% of line 16) | 0 | 0 | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,387,636.00 | 1,387,636.00 | 1,387,636.00 | 1,387,636.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | 0 | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | 0 | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 80,000.00 | 79,100.42 | 79,100.42 | 79,100.42 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | 0 | 0 | 0 |

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

Annual Statement/
Performance and
Evaluation
Report

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

Part II: Supporting Pages
Comprehensive Grant Program (CGP)

[illegible]

1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

| | | |
|---|--|---|
| Annual Statement/ Performance and Evaluation Report Part II: Supporting Pages Comprehensive Grant Program (CGP) | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | OMB Approval No. 2577-0157 (Exp. 7/31/95) |
|---|--|---|

| Development Number / Name HA - Wide Activities | General Description of Major Work Categories | Development Account Number | Quantity | Total Actual Cost | | Status of Proposed Work (2) | |
|---|--|----------------------------|----------|-------------------|------------|-----------------------------|---------------------|
| | | | | original | Revised | | Funds Obligated (2) |
| PHA-WIDE | SECURITY PATROL & equipment | 1408 | | 80,000.00 | 79,100.42 | 79,100.42 | complete |
| | RESIDENT EMPLOYMENT & TRAINING | 1408 | | 125,000.00 | 137,801.11 | 137,801.11 | complete |
| | RECREATION LEADER PLUS FRINGE | 1408 | | 35,000.00 | 25,294.25 | 25,294.25 | complete |
| | RECREATION ACTIVITIES & SUPPLIES | 1408 | | 15,000.00 | 20,220.82 | 20,220.82 | complete |
| | TENANT MOVING ASSISTANT | 1408 | | 5,000.00 | 0 | 0 | complete |
| | MODERNIZATION COORDINATOR & FRINGE | 1410 | | 58,842.23 | 48,028.86 | 48,028.86 | complete |
| | SUNDRY | 1410.19 | | 5,000.00 | 3,233.08 | 3,233.08 | complete |
| | CLERK OF THE WORKS | 1410 | | 56,842.21 | 42,788.68 | 42,788.68 | complete |
| | A&E FEES & COSTS | 1430 | | 100,000.00 | 79,409.71 | 79,409.71 | complete |
| | Consultant | 1430 | | 0 | 0 | 0 | complete |
| | Staff Training and Travel | 1408 | | 5,000.00 | 1,450.00 | 1,450.00 | complete |
| | Computer Software | 1408 | | 2,000.00 | 2,315.00 | 2,315.00 | complete |
| | Tenant Screening | 1408 | | 6,000.00 | 5,657.50 | 5,657.50 | complete |
| | Appliances | 1465.1 | 120 | 35,000.00 | 34,370.32 | 34,370.32 | complete |
| | Executive Director | 1410 | 30% | 8,557.75 | 8,557.75 | 8,557.75 | complete |
| | Housing Project Assistant | 1410 | 10% | 4,910.04 | 4,910.04 | 4,910.04 | complete |
| | Principal Account Clerk | 1410 | 10% | 4,611.37 | 4,611.37 | 4,611.37 | complete |
| | HQ/MRA Coordinator | 1408 | | 35,000.00 | 31,597.48 | 31,597.48 | complete |
| | Paint & Patch | 1460 | | 95,000.00 | 76,442.05 | 76,442.05 | complete |
| | Emergency Generator | 1465.1 | 1 | 1,180.00 | 1,180.00 | 1,180.00 | complete |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

| | |
|--|--|
| Signature of Executive Director and Date | Signature of Public Housing Director/Office of Native American Programs Administrator and Date |
|--|--|

Annual Statement/Performance and Evaluation Report

Part III: Implementation Schedule

Comprehensive Grant Program (CGP)

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | | Reasons for Revised Target Dates |
|--------------------------------|-----------------|----------|---------|----------------|----------|---------|----------------------------------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | Actual* | |
| | | | | | | | |
| NY29-1 Baker Homes | 3/31/01 | | | 9/30/01 | 12/31/01 | | complete |
| NY29-2 Gates Ave. | 3/31/01 | | | 9/30/01 | 6/30/02 | | complete |
| Parkview Towers | 3/31/01 | | | 9/30/01 | 9/30/01 | | |
| PHA-WIDE | 3/31/01 | | | 9/30/01 | 9/30/01 | | complete |

Annual Statement/Performance and Evaluation Report

Part I: Summary

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Capital Fund Program (CFP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

| | | |
|--|---------------------------------------|-------------------------------|
| HA Name Lackawanna Municipal Housing Authority | Capital Fund Program NY06P02950100 | FFY of Grant Approval 2000 |
|--|---------------------------------------|-------------------------------|

| Revision #2 | | | | |
|--|---|----------------------|--------------|-----------------------|
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending 12/01 <input type="checkbox"/> Final Performance & Evaluation Report | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) |
| | | Original | Revised (1) | Obligated |
| 1 | Total Non-CGP Funds | 0 | 0 | 0 |
| 2 | Operations | 116,836.00 | 179,191.72 | 179,191.72 |
| 3 | Management Improvements | 158,500.00 | 168,500.00 | 168,500.00 |
| 4 | Administration | 130,700.00 | 135,144.28 | 135,144.28 |
| 5 | Audit | 0 | 0 | 0 |
| 6 | Liquidated Damages | 0 | 0 | 0 |
| 7 | Fees and Costs | 20,000.00 | 20,000.00 | 20,000.00 |
| 8 | Site Acquisition | 0 | 0 | 0 |
| 9 | Site Improvement | 10,000.00 | 10,000.00 | 10,000.00 |
| 10 | Dwelling Structures | 822,664.00 | 750,864.00 | 750,864.00 |
| 11 | Dwelling Equipment-Nonexpendable | 50,000.00 | 50,000.00 | 50,000.00 |
| 12 | Non dwelling Structures | 5,000.00 | 0 | 0 |
| 13 | Non dwelling Equipment | 0 | 0 | 0 |
| 14 | Relocation Costs | 0 | 0 | 0 |
| 15 | Replacement Reserve | 0 | 0 | 0 |
| 16 | Contingency (may not exceed 8% of line 16) | 0 | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,313,700.00 | 1,313,700.00 | 1,313,700.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 25,000.00 | 35,000.00 | 35,000.00 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | 0 | 0 |

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

| | |
|--|--|
| Signature of Executive Director and Date X | Signature of Public Housing Director/Office of Native American Programs Administrator and Date X |
|--|--|

Part II: Supporting Pages
Capital Fund Program (CFP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

| | |
|---|--|
| (1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report. | |
| Signature of Executive Director and Date | Signature of Public Housing Director/Office of Native American Programs Administrator and Date |

Annual Statement/ Performance and Evaluation Report
Part II: Supporting Pages
Comprehensive Grant Program (CGP)

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/Performance and Evaluation Report

Part III: Implementation Schedule
Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | Reasons for Revised Target Dates | |
|--------------------------------|-----------------|----------|---------|----------------|----------|----------------------------------|---------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | | Actual* |
| | | | | | | | |
| NY29-1 Baker Homes | 3/31/02 | | | 9/30/03 | | | |
| NY29-2 Gates Ave. | 3/31/02 | | | 9/30/03 | | | |
| Parkview Towers | 3/31/02 | | | 9/30/03 | | | |
| PHA-WIDE | 3/31/02 | | | 9/30/03 | | " | |

Annual Statement/Performance
and Evaluation Report

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Part I: Summary

OMB Approval No. 2577-0157 (Exp. 7/31/95)

HA Name Lackawanna Municipal Housing Authority

Capital Fund Program
NY06P02950101

FFY of Grant Approva
2001

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☒ Performance & Evaluation Report for Program Year Ending

12/01

☐ Final Performance & Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) | |
|----------|---|----------------------|------------|-----------------------|------------|
| | | Original | Revised(1) | Obligated | Expended |
| 1 | Total Non-CGP Funds | 0 | | 0 | 0 |
| 2 | 1406 Operations | 248,737.00 | | 248,737.00 | 248,737.00 |
| 3 | 1408 Management Improvements | 124,000.00 | | 124,000.00 | 0 |
| 4 | 1410 Administration | 132,200.00 | | 127,200.00 | 0 |
| 5 | 1411 Audit | 0 | | 0 | 0 |
| 6 | 1415 Liquidated Damages | 0 | | 0 | 0 |
| 7 | 1430 Fees and Costs | 51,000.00 | | 0 | 0 |
| 8 | 1440 Site Acquisition | 0 | | 0 | 0 |
| 9 | 1450 Site Improvement | 25,000.00 | | 0 | 0 |
| 10 | 1460 Dwelling Structures | 607,500.00 | | 510,000.00 | 0 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 95,000.00 | | 0 | 0 |
| 12 | 1470 Nondwelling Structures | 60,249.00 | | 0 | 0 |
| 13 | 1475 Nondwelling Equipment | 0 | | 0 | 0 |
| 14 | 1495.1 Relocation Costs | 0 | | 0 | 0 |
| 15 | 1490 Replacement Reserve | 0 | | 0 | 0 |
| 16 | 1502 Contingency (may not exceed 8% of line 16) | 0 | | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,343,686.00 | | 1,009,937.00 | 248,737.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 0 | | 0 | 0 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | | 0 | 0 |

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

| | | |
|---|---------------------------|----------------------------|
| Annual Statement/ Performance and Evaluation Report | Part II: Supporting Pages | Capital Fund Program (CFP) |
|---|---------------------------|----------------------------|

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

| Annual Statement/ Report | Performance | Evaluation |
|---|-------------|------------|
| Part II: Supporting Capital Fund Program (CFP) | | |

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

| Development Number / HA - Wide Activities | General Description of Major Work Categories | Development Account Number | Quantity | Total Actual Cost | | | | Status of Proposed Work (2) |
|--|--|----------------------------|----------|-------------------|-------------|---------------------|--------------------|-----------------------------|
| | | | | ORIGINAL | Revised (1) | Funds Obligated (2) | Funds Expended (2) | |
| PHA-WIDE | Resident Training | 1408 | | 30,000.00 | | 30,000.00 | 0 | ongoing |
| | Staff Training | 1408 | | 5,000.00 | | 5,000.00 | 0 | ongoing |
| | Computer Software | 1408 | | 2,000.00 | | 2,000.00 | 0 | ongoing |
| | Tenant Screening | 1408 | | 2,000.00 | | 2,000.00 | 0 | ongoing |
| | Recreation Program | 1408 | | 85,000.00 | | 85,000.00 | 0 | ongoing |
| | Tenant Relocation Assistant | 1408 | | 5,000.00 | | 5,000.00 | 0 | ongoing |
| | Modernization Coordinator | 1410 | | 51,000.00 | | 51,000.00 | 0 | ongoing |
| | Clerk of the Works | 1410 | | 45,000.00 | | 45,000.00 | 0 | ongoing |
| | Executive Director | 1410 | | 18,000.00 | | 18,000.00 | 0 | ongoing |
| | Housing Project Assistant | 1410 | | 5,200.00 | | 5,200.00 | 0 | ongoing |
| | Principal Account Clerk | 1410 | | 5,000.00 | | 5,000.00 | 0 | ongoing |
| | Sundry | 1410.19 | | 3,000.00 | | 3,000.00 | 0 | ongoing |
| | A/E Fees | 1430 | | 50,000.00 | | 0 | 0 | planning |
| | Consultant | 1430 | | 1,000.00 | | 0 | 0 | planning |
| | New Entry Locks | 1460 | | 10,000.00 | | 10,000.00 | 0 | ongoing |
| | Appliances | 1465.1 | | 50,000.00 | | 0 | 0 | planning |
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(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/Performance
and Evaluation Report

Part III: Implementation Schedule
Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development

Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | | Reasons for Revised Target Dates |
|--------------------------------|-----------------|----------|---------|----------------|----------|---------|----------------------------------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | Actual* | |
| NY29-1 Baker Homes | 12/31/02 | | | 6/30/04 | | | |
| NY29-2 Gates Ave. | 12/31/02 | | | 6/30/04 | | | |
| Parkview Towers | 12/31/02 | | | 6/30/04 | | | |
| PHA-WIDE | 12/31/02 | | | 6/30/04 | | | " |

EXHIBIT I

Voluntary Conversions Initial Assessments Component 10 (b)

COMPONENT 10, (b) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the required initial assessments?

Two

- b. How many of the PHA's developments are not subject to the required initial assessments based on exemptions?

One

- c. How many assessments were conducted for the PHA's covered developments

In Process

- d. Identify PHA Developments that may be appropriate for conversion based on the required initial assessments:

None

- e. Streamlined consolidated plan requirements for multiple jurisdictions :

N/A

- f. Resident Advisory Board Notification of Plan Process:

See Attachment A enclosed

EXHIBIT J

Appointment & Organization Chart - LMHA

Lackawanna Municipal Housing Authority

Board of Commissioners and Executive Committee

Appointment & Organizational Chart

| Commissioners and Executive Committee | | | Term of Appointment | | |
|--|---------------------|--|---|-------------------|------------------------|
| Title | Name | Address | Phone(s) | Appt. Date | Expiration Date |
| Chairman | Salvatore Monaco | 87 Shamokin Drive Lackawanna, NY 14218 | 823-0906 | 11/15/00 | 11/15/2005 |
| Vice-Chairman | Narciso Rodriguez | 29 Orange Street Lackawanna, NY 14218 | 825-6865 | 11/6/00 | 11/15/2002 |
| Executive Director | Thomas J. Radich | 42 Bedford Avenue Lackawanna, NY 14218 | 827-8369 - H 823-2551 - W | 1/31/01 | 1/31/05 |
| Counsel (Acting) | Frank L. Bybel | 674 Ridge Road Lackawanna, NY 14218 | 823-2558 - W 308-3446 - C | 1/31/01 | |
| Commissioner | Jimmie Royster, Jr. | 137 Wilmoth Lackawanna, NY 14218 | 822-4182 H, 570-3462 C, 517-2236 W, 517-3841 W | 2/22/00 | 11/15/2003 |
| Tenant Commissioner | Dorothy Glover | 56-1 Gates Avenue Lackawanna, NY 14218 | 828-1435 | 7/1/02 | 6/30/2004 |
| Tenant Commissioner | Mary Rodriguez | 21 Olcott, Lackawanna, NY 14218 | | 7/1/02 | 6/30/2004 |
| Member | Anthony | 79 Circle Lane | H - 826-2167, W | 12/22/00 | 11/15/2004 |

| | | | | | |
|--------|----------------|--|------------|----------|------------|
| | Mingarelli | Lackawanna, NY 14218 | 652-1380 | | |
| Member | John D. Bozich | 158 Edison Street Lackawanna, NY 14218 | H-823-4947 | 11/15/01 | 11/15/2006 |

COMMISSIONERS AND EXECUTIVE COMMITTEE ARE KINDLY ASKED TO PROVIDE THE MOST RECENT CONTACT INFORMATION TO BOARD SECRETARY TO ENSURE THAT LIST IS UP -TO-DATE AND ACCURATE.

EXHIBIT A

CAPTIAL FUND
RESIDENT
RECOMMENDATION
MEETINGS

lackawanna
municipal
housing
authority

April 25, 2002

To: Members of the QHWRA Resident Advisory Board
Grovetta Ellison, Marge Riley, Carol Labby, Mary Strachan

From: Robert W. McManus, Housing Project Assistant

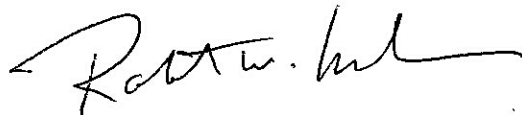
Re: Inaugural Meeting of Resident Advisory Board

Dear Member of the Resident Advisory Board,

Please be advised that there will be a meeting of the Resident Advisory Board involved in the Quality Housing Work Responsibility Act (QHWRA). This meeting will be held on **Thursday, May 2, 2002 @ 10:00 am** at the Main Office of the Authority located 135 Odell Street, Lackawanna, New York 14218. As a member of the Resident Advisory Board, your presence at this meeting is anticipated and greatly appreciated.

Please call me at the main office of the Authority at 823-2551.

Sincerely,
Lackawanna Municipal Housing Authority



Robert W. McManus
Housing Project Assistant

**Summary of Resident Advisory Board meeting
held on Thursday, May 2, 2002 @ 10:00 AM at
the Main Office of the Authority - 135 Odell St.**

In attendance:

Staff: Robert McManus, Housing Project Assistant, Damian W. Grabowski, Computer Support Specialist

Resident Advisory Board: Marge Riley, Grovetta Ellison, Carol Labby, Mary Strachan.

Log Sign-In Sheet

| Name Print | Signature |
|-------------------|-------------------------|
| MARGE RILEY | <i>Marge Riley</i> |
| MARY STRACHAN | <i>Mary Strachan</i> |
| GROVETTA ELLISON | <i>Grovetta Ellison</i> |
| CAROL LABBY | <i>Carol Labby</i> |

- During the course of the meeting the following items were discussed:
- What is the purpose of the Resident Advisory Board? And what is its role in the development of the Annual Plan?
- Introduction to the Annual and 5 Year Plan goals.
- Page by page synopsis of Annual Plan and initiatives.
- Sharing of ideas and residents concerns, objections and additions.

Sincerely,
Lackawanna Municipal Housing Authority

Robert W. McManus

Robert W. McManus
Housing Project Assistant

***Names and Addresses of Members of Resident
Advisory Board for 2002 Submission of the
Lackawanna Municipal Authority's Agency Plan***

LMHA Four (4) Member Resident Advisory Board

| Resident Name | Address |
|-------------------------|---|
| Grovetta Ellison | 6 Phillips Place Lackawanna, NY 14218 |
| Marge Riley | 600 Ridge Road – Apt# 310 Lackawanna, NY 14218 |
| Carol Labby | 600 Ridge Road – Apt# 209 Lackawanna, NY 14218 |
| Mary Strachan | 600 Ridge Road – Apt# 707 Lackawanna, NY 14218 |

June 13, 2002

Public Notice - Agency Plan

The Lackawanna Municipal Housing Authority will conduct a Public Hearing according to the Federal Register CFR 24 - Section 903.17 to discuss the PHA plan and hereby invites comment on the plan.

The draft of the Agency plan has been available for review and inspection since May 1, 2002 at our main office located 135 Odell Street, Lackawanna, New York 14218. Interested residents are welcome to visit our office to inspect the drafted plan. Any questions, input, or ideas can be addressed at the public hearing.

The public hearing will be held on *Thursday, June 20, 2002 at 5:00 PM at Parkview Towers located at 600 Ridge Road Lackawanna, New York 14218.

•Note: The day of the week as originally posted in the May 2002 Newsletter is correctly reflected herein as *Thursday* (June 20, 2002) in lieu of the incorrect day of Friday (June 20, 2002).

Sincerely,
Lackawanna Municipal Housing Authority

Thomas J. Radich, PHM
Executive Director

EXHIBIT B

PHA Certifications of
Compliance with the
PHA Plans, Certification
for a Drug Free Work
Place... and Disclosure
of Lobbying Activities

PHA Certifications of Compliance with the PHA Plans and Related Regulations Board Resolution to Accompany the PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year Plan and Annual Plan for PHA fiscal year beginning _____, hereinafter referred to as the Plan of which this document is a part and make the following certifications and agreements with the Department of Housing Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low- or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.
13. For PHA Plan that includes a PHDEP Plan as specified in 24 CFR 761.21: The PHDEP Plan is consistent with and conforms to the "Plan Requirements" and "Grantee Performance Requirements" as specified in 24 CFR 761.21 and 761.23 respectively and the PHA will maintain and have available for review/inspection (at all times), records or documentation of the following:
 - Baseline law enforcement services for public housing developments assisted under the PHDEP plan;
 - Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);
 - Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;
 - Coordination with other law enforcement efforts;
 - Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and
 - All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.
14. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
15. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
16. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
17. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
18. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
19. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
20. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments.).
21. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.

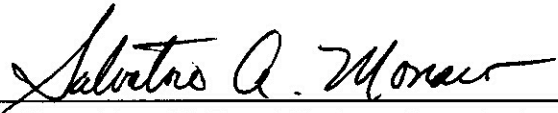
22. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and attachments at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

Lackawanna Housing Authority

NY029

PHA Name

PHA Number

 6/28/02

Signed/Dated by PHA Board Chair or other authorized PHA official

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Lackawanna Municipal Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Agency Plan

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official
Thomas J. Radich, PHM

Title
Executive Director

Signature

Date

05/08/02

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

Approved by OMB

0348-0046

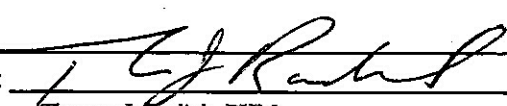
| | | | | | |
|---|--|---|--|--|--|
| 1. Type of Federal Action: <input checked="checked" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | | 2. Status of Federal Action: <input checked="checked" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | | 3. Report Type: <input checked="checked" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ | |
| 4. Name and Address of Reporting Entity: <input checked="checked" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Lackawanna Municipal Housing Authority 135 Odell Street Lackawanna, New York 14218 Congressional District, if known: 30th | | | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: | | |
| 6. Federal Department/Agency: U.S. Department of Housing and Urban Development | | | 7. Federal Program Name/Description: Public Housing Agency Plan - Capital Fund Program CFDA Number, if applicable: | | |
| 8. Federal Action Number, if known: | | | 9. Award Amount, if known: \$ 1,343,686.00 | | |
| 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): | | | b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): | | |
| 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | | | Signature:  Print Name: Thomas J. Radich, PHM Title: Executive Director Telephone No.: 716-823-2551 Date: 05/08/02 | | |
| Federal Use Only | | | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) | |

EXHIBIT C

Certifications by State or
Local Official of PHA
Plans Consistency with
the Consolidated Plan

**Certification by State or Local Official of PHA Plans Consistency with
the Consolidated Plan**

I, Judith A. Calogero the DHCR Commissioner certify
that the Five Year and Annual PHA Plan of the Lackawanna Housing Authority is
consistent with the Consolidated Plan of State of New York prepared
pursuant to 24 CFR Part 91.

 5-14-02
Signed / Dated by Appropriate State or Local Official

EXHIBIT D

Certification of Payments to Influence Federal Transactions

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Lackawanna Municipal Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Agency Plan

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

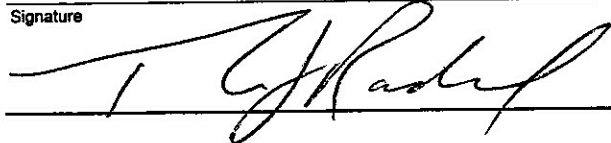
Name of Authorized Official

Thomas J. Radich, PHM

Title

Executive Director

Signature



Date (mm/dd/yyyy)

05/08/02

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

EXHIBIT E

Scope and Schedules of LMHA Maintenance Policy

Scope and Schedules of Regular Maintenance and Preventative Maintenance

- Daily •Weekly
- Monthly •Quarterly
- Seasonal •Annual



implemented 7/1/98

Lackawanna Municipal Housing Authority

Thomas J. Radich, P.H.M. Executive Director

Goals and Purpose of Lackawanna Municipal Housing Authority Preventative Maintenance Schedule

The Lackawanna Municipal Housing Authority recognizes the need and importance of maintaining and adhering to a working preventative maintenance plan. In establishing and following a timetable of revolving maintenance schedules on a daily, weekly, quarterly, seasonal and monthly basis, the Authority will be able to prioritize and scrutinize existing areas and conditions that need and require periodic attention. The Lackawanna Municipal Housing Authority's preventative maintenance plan is instituted to perpetuate safe and sound operation of all key and ancillary mechanical and physical conditions through all project locations. Items that require attention will be attended to through assignment of work orders to personnel best suited to repair or reconcile to proper operating conditions and/or levels of safety. It is the predominant intention of the Authority that the carrying out of a preventive maintenance plan will facilitate the identification and relief of problems *before* they occur.

The purpose and goal of a disciplined and diligent preventative maintenance schedule will hopefully payback dividends to the Authority by diminishing breakdowns; increasing the life, operation and efficiency of equipment; and perpetuate the preservation and safety of persons and property. In reliably adhering to a schedule of preventative maintenance, the Authority intends to raise and improve upon the level of safety of its operations and ultimately bring a higher quality of housing to its residents.

The Authority is very concerned for safety and risk control and as such is committed to the following workplan as set forth and delineated in the following pages. Inspections of specific items are distributed to the most appropriate daily, weekly, monthly, quarterly, and seasonal timetables. The placement of items in a particular timetable have been established relative to the urgency/ importance of the item necessitating such periodic attention as follows:

DAILY MAINTENANCE SCHEDULE

General Outline of Daily Maintenance:

- All lawn equipment will be checked for fluid level, belt damage, leaks, cutting area and other visible damage.
- All Lackawanna Municipal Housing Authority vehicles and other equipment will be checked for tire damage, fluid level, leaks, and other visible or obvious damage.
- All small equipment (chain saw, weed wackers, etc.) will be checked for gas mixture, loose parts, other dangerous conditions that may hinder performance.
- Visual inspection of all grounds will be made to check for sewer problems, broken windows, any damage that need emergency attention.
- All community areas and laundry rooms will be checked for lighting and emergency problems.
- Trash compactor at park view will be checked for safe operation.
- All boiler rooms will be checked for safe operation, all pumps and piping checked for visible leaks, floors and open areas checked for clutter and tripping hazards.
- All public restrooms will be check for proper operation, cleaned and sanitized all main lighting and street lighting will be checked.

ITEM SPECIFIC DAILY INSPECTIONS:

| <i>Item to be inspected:</i> | <i>Freq.</i> | <i>Proj.</i> | <i>Category</i> |
|------------------------------------|--------------|--------------|-----------------------------------|
| Community rooms, laundry rooms | D | 29-1,2 | Building Interiors |
| Public rest rooms | D | 29-1,2 | Building Interiors |
| Offices | D | 29-1,2 | Building Interiors |
| Site Lighting | D | 29-1,2 | Electric Distribution System |
| Central heating boilers | D | 29-1,2 | Heating, Ventilator & A/C Systems |
| Site Lighting | D | 29-6 | Electric Distribution System |
| Water pressure | D | 29-6 | Electric Distribution System |
| Domestic water booster pumps | D | 29-6 | Electric Distribution System |
| Community room & laundry room | D | 29-6 | Building Interiors |
| Public rest rooms | D | 29-6 | Building Interiors |
| Lighting in common areas | D | 29-6 | Building Interiors |
| Janitor closets | D | 29-6 | Building Interiors |
| Offices | D | 29-6 | Building Interiors |
| Central heating boilers | D | 29-6 | Heating Ventilation & A/C Systems |
| Pumps boilers & domestic hot water | D | 29-6 | Heating Ventilation & A/C Systems |
| Trash compactors | D | 29-6 | Building Interiors |
| Water coolers | D | 29-6 | Building Interiors |

WEEKLY MAINTENANCE SCHEDULE

General Outline of Weekly Maintenance:

- All lawn and snow equipment will be checked for hours in use and if needed oil changed and greased.
- All boilers will be checked in more detail than weekly, gauges, valves, pressure rating will be checked and marked (*service of boiler systems and conditioning of water are contracted out).
- All grounds will be checked as per weekly, plus grass, bushes, and other greenery will be checked and cut as needed.
- Elevator area will be checked for unsafe conditions or any problems (*service and repairs are contracted out).
- All sump pumps in units will be checked for proper operation (float test will be made and electrical connection checked).
- All ventilation systems will be checked including filtering system for any visible problems (*a/c and outside air handling units are under contract).

ITEM SPECIFIC WEEKLY INSPECTIONS:

| | | | |
|---|---|--------|-----------------------------------|
| Sump pumps | W | 29-1,2 | Building Interiors |
| Lighting in common areas | W | 29-1,2 | Building Interiors |
| Floor tile, carpets, mats | W | 29-1,2 | Building Interiors |
| Load Management Equipment | W | 29-1,2 | Electric Distribution System |
| Lawns, shrubs | W | 29-1,2 | Grounds |
| Sidewalks, parking lots, curbing | W | 29-1,2 | Grounds |
| Outdoor stairs, handrails, fences | W | 29-1,2 | Grounds |
| Trash containers, catch basin | W | 29-1,2 | Grounds |
| Trucks | W | 29-1,2 | Grounds Maintenance Equipment |
| Tractors | W | 29-1,2 | Grounds Maintenance Equipment |
| Sump pumps | W | 29-6 | Building Interiors |
| Elevator room & equipment | W | 29-6 | Building Interiors |
| Floor tile & carpets, mats | W | 29-6 | Building Interiors |
| Load management equipment | W | 29-6 | Electric Distribution System |
| Emergency generator | W | 29-6 | Fire & Safety Systems & Equipment |
| Stairwell doors & stairwells | W | 29-6 | Fire & Safety Systems & Equipment |
| Fire Pumps | W | 29-6 | Fire & Safety Systems & Equipment |
| Trucks, mowers, snow blowers, snow plows | W | 29-6 | Grounds Maintenance Equipment |
| Lawns, shrubs | W | 29-6 | Grounds |
| Benches, trees, fertilizer | W | 29-6 | Grounds |
| Trash containers, patio | W | 29-6 | Grounds |
| Outdoor ramps, handrails | W | 29-6 | Grounds |
| Sidewalks, parking lots, curbing | W | 29-6 | Grounds |
| Air compressor | W | 29-6 | Heating Ventilation & A/C Systems |
| Central air conditioning systems & controls | W | 29-6 | Heating Ventilation & A/C Systems |
| Ventilation & exhaust fans | W | 29-6 | Heating Ventilation & A/C Systems |
| Central air handlers | W | 29-6 | Heating Ventilation & A/C Systems |

MONTHLY MAINTENANCE REPORT

General Outline of Monthly Maintenance:

- All "K"-units and "A"-units will be checked, including walls, lighting, stairs, basement, doors, exterior conditions, hot waters tanks, furnace and all piping.
- Visual check of gutters, downspouts, roofs, and grounds will be made.
- All outside lighting will be checked, including porch, courtyard, and street.
- Fire system and extinguishers will be checked for visible damage or other problems (*Parkview fire and sprinkler system is contracted out).
- Shop and work area will be checked and cleaned, including all bench areas storage areas and lighting.
- All water pits will be checked for leaks and other problems.
- All basement areas at Parkview and gates will be checked for problems.
- All storm sewers will be checked for blockage and other problems.

ITEM SPECIFIC MONTHLY & BI-MONTHLY INSPECTIONS:

| | | | |
|--|----|--------|------------------------------------|
| Water coolers | M | 29-1,2 | Building Interiors |
| Office equipment | M | 29-1,2 | Building Interiors |
| Storage rooms | M | 29-1,2 | Building Interiors |
| Electric meters | M | 29-1,2 | Electric Distribution System |
| Fire Extinguishers | M | 29-1,2 | Fire & Safety Systems & Equipment |
| Domestic hot water sump pump's | M | 29-1,2 | Heating, Ventilator & A/C Systems |
| Pumps heating | M | 29-1,2 | Heating, Ventilator & A/C Systems |
| Central hot water heaters & tanks | M | 29-1,2 | Heating, Ventilator & A/C Systems |
| Portable power tools | M | 29-1,2 | Maintenance Shops, Garages & Equip |
| Storage areas, shelving | M | 29-1,2 | Maintenance Shops, Garages & Equip |
| Work benches, shop power equipment & tools | M | 29-1,2 | Maintenance Shops, Garages & Equip |
| Gas meters | M | 29-1,2 | Natural Gas Distribution System |
| Gas piping | M | 29-1,2 | Natural Gas Distribution System |
| Water meter pits | M | 29-1,2 | Water Distribution System |
| Lobbies & corridors | M | 29-6 | Building Interiors |
| Smoke detectors | BM | 29-1,2 | Fire & Safety Systems & Equipment |
| Heat/smoke detectors | BM | 29-6 | Fire & Safety Systems & Equipment |
| Office equipment | M | 29-6 | Building Interiors |
| Crawl spaces | M | 29-6 | Building Interiors |
| Storage rooms | M | 29-6 | Building Interiors |
| Electric meter | M | 29-6 | Electric Distribution System |
| Watermeter pit | M | 29-6 | Electric Distribution System |
| Emergency call system | M | 29-6 | Fire & Safety Systems & Equipment |
| Fire exit signs | M | 29-6 | Fire & Safety Systems & Equipment |
| Fire alarm system | M | 29-6 | Fire & Safety Systems & Equipment |
| Fire & smoke doors | M | 29-6 | Fire & Safety Systems & Equipment |
| Elevator fire emergency system | M | 29-6 | Fire & Safety Systems & Equipment |
| Fire Hoses | M | 29-6 | Fire & Safety Systems & Equipment |
| Fire Extinguishers | M | 29-6 | Fire & Safety Systems & Equipment |
| Work benches, shop power equip & tools | M | 29-6 | Maintenance Shops, Garages & Equip |
| Storage areas, shelving, port. power tools | M | 29-6 | Maintenance Shops, Garages & Equip |
| Gas piping | M | 29-6 | Natural Gas Distribution System |
| Gas meters | M | 29-6 | Natural Gas Distribution System |

QUARTERLY & SEMI-ANNUAL MAINTENANCE SCHEDULE

General Outline of Quarterly Maintenance:

- All manhole and covers will be inspected for blockage and damage.
- All cleanouts and covers will be inspected for damage.
- All chimneys will be inspected for structural problems and damage.
- All units exteriors will be checked for damage or unsafe conditions, including roofs, foundation, landscaping, windows, doors, caulk condition, masonry and eaves.
- Parkview-roof area, entrance door, roof membrane, masonry, and caulk conditions will be inspected for damage.
- A complete inspection of sidewalks and walkways (front and rear), railings and stairs.

ITEM SPECIFIC QUARTERLY INSPECTIONS:

| | | | |
|--|---|--------|--|
| Domestic hot water heaters | Q | 29-1,2 | Apartments |
| Roof flashings & caulking, roof vents, masonry & mortar, roof drains, gutter & down spouts | Q | 29-1,2 | Building Exteriors |
| Exterior brickwork, mortar joints, caulking | Q | 29-1,2 | Building Exteriors |
| Shingle roofs, membrane roofs, roof ballast | Q | 29-1,2 | Building Exteriors |
| Walkways & handrails eaves, roof entry doors & frames, chimneys | Q | 29-1,2 | Building Exteriors |
| Window frames, caulking, screens, glass entry doors, storm doors, door closers | Q | 29-1,2 | Building Exteriors |
| Signs, mailboxes | Q | 29-1,2 | Building Interiors |
| Entry steps, porches, canopies | Q | 29-1,2 | Building Exteriors |
| Doors & frames, hinges, hardware in common areas | Q | 29-1,2 | Building Interiors |
| Windowsills, foundation walls, siding | Q | 29-1,2 | Building Exteriors |
| Electric power lines & poles | Q | 29-1,2 | Electric Distribution System |
| Play areas, benches, tables, mailboxes | Q | 29-1,2 | Grounds |
| Trees, Bushes, fertilize lawns | Q | 29-1,2 | Grounds |
| Hand tools | Q | 29-1,2 | Maintenance Shops, Garages & Equipment |
| Membrane roof, roof ballast, roof flashing | Q | 29-6 | Building Exteriors |
| Roof drains, walkways & handrails | Q | 29-6 | Building Exteriors |
| Signs & mail boxes | Q | 29-6 | Building Interiors |
| Caulking, roof vents, roof mounted | Q | 29-6 | Building Exteriors |
| Antennas, roof hatches, masonry & mortar | Q | 29-6 | Building Exteriors |
| Doors & frames hinges & hardware in common areas | Q | 29-6 | Building Interiors |
| Transformers | Q | 29-6 | Electric Distribution System |
| Fire sprinklers | Q | 29-6 | Fire & Safety Systems & Equip |
| Lawns, sanitary sewer manholes | Q | 29-6 | Grounds |
| Hand tools | Q | 29-6 | Maintenance Shops, Garages & Equip |

ITEM SPECIFIC SEMI-ANNUAL INSPECTIONS:

| | | | |
|--|----|--------|--|
| Lubricate door locks | SA | 29-1,2 | Building Exteriors |
| Clocks | SA | 29-1,2 | Building Interiors |
| Transformers | SA | 29-1,2 | Electric Distribution System |
| Panel boards | SA | 29-1,2 | Electric Distribution System |
| Sanitary sewers & manholes | SA | 29-1,2 | Grounds |
| Boiler controls | SA | 29-1,2 | Heating, Ventilator & A/C Systems |
| Gas mains | SA | 29-1,2 | Natural Gas Distribution System |
| Water mains | SA | 29-1,2 | Water Distribution System |
| Emergency call alarms, lubricate locks | SA | 29-6 | Apartments |
| Ceilings, walls, flooring, windows & screens | SA | 29-6 | Apartments |
| Wall outlets, light switches, electrical panels | SA | 29-6 | Apartments |
| Doors & frames, kitchen & medicine cabinets | SA | 29-6 | Apartments |
| Ceramic tile, caulking, countertops | SA | 29-6 | Apartments |
| Plumbing fixtures, electrical heat, light fixtures | SA | 29-6 | Apartments |
| GFI's, exhaust fans, range hoods, thermostats | SA | 29-6 | Apartments |
| Door & intercom system, refrigerators, ranges | SA | 29-6 | Apartments |
| Clocks | SA | 29-6 | Building Interiors |
| Switchboards & panelboards | SA | 29-6 | Electric Distribution System |
| Water mains | SA | 29-6 | Electric Distribution System |
| Siamese fire hose connections | SA | 29-6 | Fire & Safety Systems & Equipment |
| Zone heat control system | SA | 29-6 | Heating Ventilation & Air Conditions Systems |
| Boiler controls | SA | 29-6 | Heating Ventilation & Air Conditions Systems |

ITEM SPECIFIC ANNUAL & 5 YEAR INSPECTIONS:

| | | | |
|--|-----|--------|-------------------------------|
| Painting | 5yr | 29-1,2 | Apartments |
| Ceilings, walls, flooring, windows & screens | A | 29-1,2 | Apartments |
| Refrigerators, ranges, lubricate locks, sump pumps | A | 29-1,2 | Apartments |
| Doors & frames, storm doors, kitchen & medicine cabinets, ceramic tile, tub surrounds, caulking Countertops, plumbing fixtures, furnaces, connectors Light fixtures, wallouts, light switches, electrical panels, GFI's, Exhaust fans, Thermostats | A | 29-1,2 | Apartments |
| Lawn Mowers | A | 29-1,2 | Grounds Maintenance Equipment |
| Grass cutting equipment | A | 29-1,2 | Grounds Maintenance Equipment |
| Snowblowers | A | 29-1,2 | Grounds Maintenance Equipment |
| Painting | 5yr | 29-6 | Apartments |

SEASONAL MAINTENANCE SCHEDULE

General Outline of Seasonal Maintenance:

- All gutters will be cleaned (summer & fall).
- All downspouts repaired (summer).
- All sidewalks checked and repaired (summer).
- All landscape repair (spring).
- All roofs inspected and repaired (spring & summer).
- All dumpsite areas and dumpsters inspected and repaired (summer).
- All lighting inspected and repaired (summer).
- All boilers started and checked (*contracted).
- All furnaces started and checked for repairs, filter changed, flu piping checked, carbon monoxide test preformed (fall).
- All water tanks will be checked for leakage, pressure valve test, flu piping checked, carbon monoxide test preformed (fall).
- Temperature test on "A"-units will be performed and random testing of other units will be preformed (fall).

EXHIBIT F

Statement of Progress of
Five (5) Year Plan of the
Quality Housing Work
Responsibility Act of
1998

The Lackawanna Municipal Housing Authority at this juncture is presently on target for achieving its goals for the implementation of the items contained within this Agency's Five Year Plan.

At the present time, some of the items contained within the 5 Year Plan have been implemented, or are in the progress/ planning stages of actual implementation. With the progress that has been made, we are confident that we will be able to accomplish our objectives.

EXHIBIT G

Annual Statement/
Performance and
Evaluation Reports for
Fiscal Years 1999, 2000,
2001

Annual Statement/Performance
and Evaluation Report

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Part I: Summary

Comprehensive Grant Program (CGP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

HA Name Lackawanna Municipal Housing Authority

Comprehensive Grant Number
NY06FO29707-99

FFY of Grant Approval
1999

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number ☒ Performance & Evaluation Report for Program Year Ending 12/01 ☐ Final Performance & Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) | |
|----------|---|----------------------|--------------|-----------------------|--------------|
| | | Original | Revised (1) | Obligated | Expended |
| 1 | Total Non-CGP Funds | 0 | 0 | 0 | 0 |
| 2 | 1406 Operations | 0 | 0 | 0 | 0 |
| 3 | 1408 Management Improvements | 308,436.58 | 303,436.58 | 303,436.58 | 303,436.58 |
| 4 | 1410 Administration | 138,763.60 | 112,129.78 | 112,129.78 | 112,129.78 |
| 5 | 1411 Audit | 0 | 0 | 0 | 0 |
| 6 | 1415 Liquidated Damages | 0 | 0 | 0 | 0 |
| 7 | 1430 Fees and Costs | 100,000.00 | 79,409.71 | 79,409.71 | 79,409.71 |
| 8 | 1440 Site Acquisition | 0 | 0 | 0 | 0 |
| 9 | 1450 Site Improvement | 16,475.00 | 14,975.00 | 14,975.00 | 14,975.00 |
| 10 | 1460 Dwelling Structures | 712,353.36 | 784,839.14 | 784,839.14 | 784,839.14 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 62,044.04 | 62,044.04 | 62,044.04 | 62,044.04 |
| 12 | 1470 Nondwelling Structures | 30,000.00 | 16,866.75 | 16,866.75 | 16,866.75 |
| 13 | 1475 Nondwelling Equipment | 20,000.00 | 13,935.00 | 13,935.00 | 13,935.00 |
| 14 | 1495.1 Relocation Costs | 0 | 0 | 0 | 0 |
| 15 | 1490 Replacement Reserve | 0 | 0 | 0 | 0 |
| 16 | 1502 Contingency (may not exceed 8% of line 16) | 0 | 0 | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,387,636.00 | 1,387,636.00 | 1,387,636.00 | 1,387,636.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | 0 | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | 0 | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 80,000.00 | 79,100.42 | 79,100.42 | 79,100.42 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | 0 | 0 | 0 |

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

Annual Statement/ Performance and Evaluation Report
Part II: Supporting Pages
Comprehensive Grant Program (CGP)

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/Performance and Evaluation Report

Part III: Implementation Schedule

Comprehensive Grant Program (CGP)

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | | Reasons for Revised Target Dates |
|--------------------------------|-----------------|----------|---------|----------------|----------|---------|----------------------------------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | Actual* | |
| | | | | | | | |
| NY29-1 Baker Homes | 3/31/01 | | | 9/30/01 | 12/31/01 | | complete |
| NY29-2 Gates Ave. | 3/31/01 | | | 9/30/01 | 6/30/02 | | complete |
| Parkview Towers | 3/31/01 | | | 9/30/01 | 9/30/01 | | |
| PHA-WIDE | 3/31/01 | | | 9/30/01 | 9/30/01 | | complete |

Annual Statement/Performance and Evaluation Report

Part I: Summary

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Capital Fund Program (CFP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

| | | | |
|---------|--|---------------------------------------|-------------------------------|
| HA Name | Lackawanna Municipal Housing Authority | Capital Fund Program NY06P02950100 | FFY of Grant Approval 2000 |
|---------|--|---------------------------------------|-------------------------------|

| Revision #2 | | | | |
|--|---|----------------------|--------------|-----------------------|
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending 12/01 <input type="checkbox"/> Final Performance & Evaluation Report | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) |
| | | Original | Revised (1) | Obligated |
| 1 | Total Non-CGP Funds | 0 | 0 | 0 |
| 2 | Operations | 116,836.00 | 179,191.72 | 179,191.72 |
| 3 | Management Improvements | 158,500.00 | 168,500.00 | 168,500.00 |
| 4 | Administration | 130,700.00 | 135,144.28 | 135,144.28 |
| 5 | Audit | 0 | 0 | 0 |
| 6 | Liquidated Damages | 0 | 0 | 0 |
| 7 | Fees and Costs | 20,000.00 | 20,000.00 | 20,000.00 |
| 8 | Site Acquisition | 0 | 0 | 0 |
| 9 | Site Improvement | 10,000.00 | 10,000.00 | 10,000.00 |
| 10 | Dwelling Structures | 822,664.00 | 750,864.00 | 750,864.00 |
| 11 | Dwelling Equipment-Nonexpendable | 50,000.00 | 50,000.00 | 50,000.00 |
| 12 | Non dwelling Structures | 5,000.00 | 0 | 0 |
| 13 | Non dwelling Equipment | 0 | 0 | 0 |
| 14 | Relocation Costs | 0 | 0 | 0 |
| 15 | Replacement Reserve | 0 | 0 | 0 |
| 16 | Contingency (may not exceed 8% of line 16) | 0 | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,313,700.00 | 1,313,700.00 | 1,313,700.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 25,000.00 | 35,000.00 | 35,000.00 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | 0 | 0 |

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

| | |
|--|--|
| Signature of Executive Director and Date | Signature of Public Housing Director/Office of Native American Programs Administrator and Date |
| X | X |

| | | |
|---|---------------------------|----------------------------|
| Annual Statement/ Performance and Evaluation Report | Part II: Supporting Pages | Capital Fund Program (CFP) |
|---|---------------------------|----------------------------|

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

| Annual Statement/ Report | Performance and Evaluation |
|-----------------------------|----------------------------|
| Part II: Supporting Pages | |
| Capital Fund Program (CFP) | |

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

[illegible]

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Signature of Executive Director and Date

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Part II: Supporting Pages
Capital Fund Program (CFP)

OMB Approval No. 2577-0157 (Exp. 7/31/95)

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Annual Statement/ Performance and Evaluation Report
Part II: Supporting Pages
Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/Performance and Evaluation Report

Part III: Implementation Schedule
Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | | Reasons for Revised Target Dates |
|--------------------------------|-----------------|----------|---------|----------------|----------|---------|----------------------------------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | Actual* | |
| | | | | | | | |
| NY29-1 Baker Homes | 3/31/02 | | | 9/30/03 | | | |
| NY29-2 Gates Ave. | 3/31/02 | | | 9/30/03 | | | |
| Parkview Towers | 3/31/02 | | | 9/30/03 | | | |
| PHA-WIDE | 3/31/02 | | | 9/30/03 | | | " |

Annual Statement/Performance and Evaluation Report
Part I: Summary
Capital Fund Program (CFP)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

HA Name **Lackawanna Municipal Housing Authority**

Capital Fund Program
NY06P02950101

FFY of Grant Approva
2001

| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number _____ | | <input checked="" type="checkbox"/> Performance & Evaluation Report for Program Year Ending 12/01 <input type="checkbox"/> Final Performance & Evaluation Report | | | |
|---|---|---|------------|-----------------------|------------|
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost (2) | |
| | | Original | Revised(1) | Obligated | Expended |
| 1 | Total Non-CGP Funds | 0 | | 0 | 0 |
| 2 | 1406 Operations | 248,737.00 | | 248,737.00 | 248,737.00 |
| 3 | 1408 Management Improvements | 124,000.00 | | 124,000.00 | 0 |
| 4 | 1410 Administration | 132,200.00 | | 127,200.00 | 0 |
| 5 | 1411 Audit | 0 | | 0 | 0 |
| 6 | 1415 Liquidated Damages | 0 | | 0 | 0 |
| 7 | 1430 Fees and Costs | 51,000.00 | | 0 | 0 |
| 8 | 1440 Site Acquisition | 0 | | 0 | 0 |
| 9 | 1450 Site Improvement | 25,000.00 | | 0 | 0 |
| 10 | 1460 Dwelling Structures | 607,500.00 | | 510,000.00 | 0 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 95,000.00 | | 0 | 0 |
| 12 | 1470 Nondwelling Structures | 60,249.00 | | 0 | 0 |
| 13 | 1475 Nondwelling Equipment | 0 | | 0 | 0 |
| 14 | 1495.1 Relocation Costs | 0 | | 0 | 0 |
| 15 | 1490 Replacement Reserve | 0 | | 0 | 0 |
| 16 | 1502 Contingency (may not exceed 8% of line 16) | 0 | | 0 | 0 |
| 17 | Amount of Annual Grant (Sum of lines 2-15) | 1,343,686.00 | | 1,009,937.00 | 248,737.00 |
| 18 | Amount of line 16 Related LBP Activities | 0 | | 0 | 0 |
| 19 | Amount of line 16 Related to Section 504 Compliance | 0 | | 0 | 0 |
| 20 | Amount of line 16 Related to Security | 0 | | 0 | 0 |
| 21 | Amount of line 16 Related to Energy Conservation Measures | 0 | | 0 | 0 |

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| | |
|--|--|
| Signature of Executive Director and Date X | Signature of Public Housing Director/Office of Native American Programs Administrator and Date X |
|--|--|

| | | |
|---|---------------------------|----------------------------|
| Annual Statement/ Performance and Evaluation Report | Part II: Supporting Pages | Capital Fund Program (CFP) |
|---|---------------------------|----------------------------|

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/ Performance and Evaluation Report

Part II: Supporting Pages

Comprehensive Grant Program (CGP)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

| Development Number / Name - Wide Activities | General Description of Major Work Categories | Development Account Number | Quantity | ORIGINAL | | Revised (1) | | Total Actual Cost | | Status of Proposed Work (2) |
|---|--|----------------------------|----------|-----------|--|-------------|--|---------------------|--------------------|-----------------------------|
| | | | | | | | | Funds Obligated (2) | Funds Expended (2) | |
| PHA-WIDE | Resident Training | 1408 | | 30,000.00 | | | | 30,000.00 | 0 | ongoing |
| | Staff Training | 1408 | | 5,000.00 | | | | 5,000.00 | 0 | ongoing |
| | Computer Software | 1408 | | 2,000.00 | | | | 2,000.00 | 0 | ongoing |
| | Tenant Screening | 1408 | | 2,000.00 | | | | 2,000.00 | 0 | ongoing |
| | Recreation Program | 1408 | | 85,000.00 | | | | 85,000.00 | 0 | ongoing |
| | Tenant Relocation Assistant | 1408 | | 5,000.00 | | | | 5,000.00 | 0 | ongoing |
| | Modernization Coordinator | 1410 | | 51,000.00 | | | | 51,000.00 | 0 | ongoing |
| | Clerk of the Works | 1410 | | 45,000.00 | | | | 45,000.00 | 0 | ongoing |
| | Executive Director | 1410 | | 18,000.00 | | | | 18,000.00 | 0 | ongoing |
| | Housing Project Assistant | 1410 | | 5,200.00 | | | | 5,200.00 | 0 | ongoing |
| | Principal Account Clerk | 1410 | | 5,000.00 | | | | 5,000.00 | 0 | ongoing |
| | Sundry | 1410.19 | | 3,000.00 | | | | 3,000.00 | 0 | ongoing |
| | A/E Fees | 1430 | | 50,000.00 | | | | 0 | 0 | planning |
| | Consultant | 1430 | | 1,000.00 | | | | 0 | 0 | planning |
| | New Entry Locks | 1460 | | 10,000.00 | | | | 10,000.00 | 0 | ongoing |
| | Appliances | 1465.1 | | 50,000.00 | | | | 0 | 0 | planning |
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Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement/Performance
and Evaluation Report

Part III: Implementation Schedule
Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development

Office of Public and Indian Housing

| Development Number/ Name | Funds Obligated | | | | | | Reasons for Revised Target Dates |
|--------------------------------|-----------------|----------|---------|----------------|----------|---------|----------------------------------|
| | Funds Obligated | | | Funds Expended | | | |
| | Original | Revised* | Actual* | Original | Revised* | Actual* | |
| NY29-1 Baker Homes | 12/31/02 | | | 6/30/04 | | | |
| NY29-2 Gates Ave. | 12/31/02 | | | 6/30/04 | | | |
| Parkview Towers | 12/31/02 | | | 6/30/04 | | | |
| PHA-WIDE | 12/31/02 | | | 6/30/04 | | | " |

EXHIBIT H

Replacement
Deconcentration
Questions per Final Rule
PIH99-51
(Component 3, 6)

COMPONENT 3, (6) DECONCENTRATION AND INCOME MIXING

- a. ☒ Yes ☐ No

Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

- b. ☐ Yes ☒ No

Do any of these covered developments have average incomes above or below the 85% to 115% of the average incomes of all such developments? If no, this section is complete.

In accordance with Page 284, Part C, 1, i of CFR903.2 regarding Deconcentration of Poverty and Fair Housing in Program Admissions, whereas a PHA may use Median Income instead of average income provided that the PHA includes a written explanation in its annual plan justifying the use of Median Income with said plan. As such, the LMHA has elected to use comparatives to the Median Income of the area, whereas only a slight disparity exists relative to average income comparisons.

EXHIBIT I

Voluntary Conversions Initial Assessments Component 10 (b)

COMPONENT 10, (b) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the required initial assessments?

Two

- b. How many of the PHA's developments are not subject to the required initial assessments based on exemptions?

One

- c. How many assessments were conducted for the PHA's covered developments

In Process

- d. Identify PHA Developments that may be appropriate for conversion based on the required initial assessments:

None

- e. Streamlined consolidated plan requirements for multiple jurisdictions :

N/A

- f. Resident Advisory Board Notification of Plan Process:

See Attachment A enclosed

EXHIBIT J

Appointment & Organization Chart - LMHA

Lackawanna Municipal Housing Authority

Board of Commissioners and Executive Committee

Appointment & Organizational Chart

| Commissioners and Executive Committee | | | Term of Appointment | | |
|--|------------------------|--|---|-------------------|------------------------|
| Title | Name | Address | Phone(s) | Appt. Date | Expiration Date |
| Chairman | Salvatore Monaco | 87 Shamokin Drive Lackawanna, NY 14218 | 823-0906 | 11/15/00 | 11/15/2005 |
| Vice-Chairman | Narciso Rodriguez | 29 Orange Street Lackawanna, NY 14218 | 825-6865 | 11/6/00 | 11/15/2002 |
| Executive Director | Thomas J. Radich | 42 Bedford Avenue Lackawanna, NY 14218 | 827-8369 - H 823-2551 - W | 1/31/01 | 1/31/05 |
| Counsel (Acting) | Frank L. Bybel | 674 Ridge Road Lackawanna, NY 14218 | 823-2558 - W 308-3446 - C | 1/31/01 | |
| Commissioner | Jimmie Royster, Jr. | 137 Wilmoth Lackawanna, NY 14218 | 822-4182 H, 570- 3462 C, 517-2236 W, 517- 3841 W | 2/22/00 | 11/15/2003 |
| Tenant Commissioner | Dorothy Glover | 56-1 Gates Avenue Lackawanna, NY 14218 | 828-1435 | 7/1/02 | 6/30/2004 |
| Tenant Commissioner | Mary Rodriguez | 21 Olcott, Lackawanna, NY 14218 | | 7/1/02 | 6/30/2004 |
| Member | Anthony | 79 Circle Lane | H - 826-2167, W | 12/22/00 | 11/15/2004 |

| | | | | | |
|--------|----------------|--|------------|----------|------------|
| | Mingarelli | Lackawanna, NY 14218 | 652-1380 | | |
| Member | John D. Bozich | 158 Edison Street Lackawanna, NY 14218 | H-823-4947 | 11/15/01 | 11/15/2006 |

COMMISSIONERS AND EXECUTIVE COMMITTEE ARE KINDLY ASKED TO PROVIDE THE MOST RECENT CONTACT INFORMATION TO BOARD SECRETARY TO ENSURE THAT LIST IS UP -TO-DATE AND ACCURATE.